

PATENT  
Docket No. A4-1635IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Greg A. Van Dusseldorp

Group Art Unit: 3731

Serial No. 10/604,297

Examiner:

Filed: July 9, 2003

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SURGICAL DEVICE

JUL 22 2004

SUBSTITUTE DECLARATION

OFFICIAL

Commissioner of Patents and Trademarks  
Washington, D.C. 20231

Please find enclosed a Substitute Declaration and Power of Attorney. The Substitute document, now with original signatures, is otherwise identical to the electronic Declaration originally filed with the patent application.

Should the Examiner have any questions with respect to any matter now of record, Applicant's representative may be reached at (219) 462-4999.

Respectfully submitted,

By *Domenica N.S. Hartman*  
Domenica N.S. Hartman  
Reg. No. 32,701July 22, 2004  
Hartman & Hartman, P.C.  
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2 Pages

I hereby certify that this document is being facsimile transmitted to the  
Patent and Trademark Office at the number below, on the date below:Fax # 703-372-9306 Date 7/22/04  
*Mary A. Harris*

**DECLARATION AND POWER OF ATTORNEY**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; and

I believe I am an original, first and ☐ joint ☒ sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**SURGICAL DEVICE**

described and claimed in

☐ the attached specification, Attorney Docket No. \_\_\_\_\_.  
☒ the specification filed 07/09/03, as U.S. Application Serial No. 10/604,297.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims as filed and as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I appoint: **Gary M. Hartman, Reg. No. 33,898**  
**Domenica N.S. Hartman, Reg. No. 32,701**

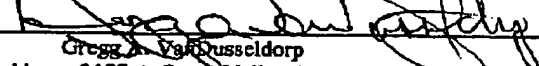
as my attorneys with full power of substitution and revocation, to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to: (219) 462-4999

Address all correspondence to: **Hartman & Hartman, P.C.**  
**552 East 700 North**  
**Valparaiso IN 46383**

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

1)

Inventor's Signature:   
Inventor's Full Name: Gregg A. Van Dusseldorp  
Inventor's Post Office Address: 2177-A Green Valley Dr., Porter County, Crown Point, IN, USA

Date: 7-12-04  
Citizenship: USA